Medicaid

Copayments and Premiums

The Deficit Reduction Act will allow states to charge higher copayments and premiums to Medicaid beneficiaries. If a certain number of states do this, the Congressional Budget Office estimates the federal government will save \$3.2 billion over 5 years.

The copayment and premium provisions are state options.

If states choose not to enact any copayments or premiums, the federal government would not save any money. If states enact them, premiums and cost-sharing cannot exceed 5 percent of a family's income, applied on a quarterly or monthly basis.

Asset Transfers

The federal government will save \$2.4 billion over 5 years from changes to the asset transfer rules for Medicaid nursing home care.

This provision is designed to prevent wealthier seniors from transferring assets to their children specifically so they can get their nursing home care paid for by the taxpayers through Medicaid.

Contrary to claims made about the provision, a senior cannot be penalized if the transfer is not intended to help qualify for Medicaid.

Even if a senior cannot show the transfer was for a non-Medicaid purpose, the bill codifies existing "hardship" procedures so that care will not be denied.

An example of this would be if a grandmother transfers assets to her grandchild to pay college tuition, under the Deficit Reduction Act, she would not lose Medicaid benefits under the "hardship" rule.